Effective October 1, 2003 10 7477 93													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
T	OTAL CLAIMS	S	14			• •		RATE	FEE	7	RATE	FEE	
F	OR		NUMBER	RFILED	NUM	BER EXTRA	·	BASIC F	385.00	OR	BASIC FEE	770.00	
T	OTAL CHARGE	ABLE CLAIMS	c4 m	inus 20=	. 8	?		X\$ 9=		OR	X\$18=		
IN	DEPENDENT C	LAIMS .	2 "	2 minus 3 =		/		X43=		-		<u> </u>	
М	MULTIPLE DEPENDENT CLAIM PRESENT									-IOR			
* If the difference in column 1 is less than zero, enter "0" in column 2								+145=		OR	L		
CLAIMS AS AMENDED - PART II								TOTAL	380	OR			
			SMALL	ENTITY	OR	OTHER SMALL							
AMENDMENT A	1/18/25	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
WQ.	Total	. 20	Minus	- 2	0	•		X\$ 9=		OR	X\$18=		
AME I	Independent	. 2	Minus	<u> </u>	3.	•		X43=		OR	X86=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1	OR	+290=		
							L	TOTAL			TOTAL		
		(Column 1)	•	(Colum	n 2)	(Column 3)	A	DDIT. FEE		OR	ADDIT. FEE		
AMENDMENT B	2/11/05	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Z .	Total	. 20	Minus	- 20	9	. —·	ſ	X\$ 9=		OR	X\$18=		
AME	Independent	. 2	Minus		3	•		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=			+290=		
							L	TOTAL	<u> </u>	OR	TOTAL		
1	6/29/06(Column 1) (Column 2) (Column 3)								<u> </u>	OR ,	LOOT. FEE		
	\$	CLAIMS		(Column		(Column 3)	_				 ,		
5 L		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	SLY	PRESENT EXTRA	İ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 20	Vinus	<u>- 2</u>	0	= Q	7	X 9-9-	\sim	OR	X\$18=		
	Independent		Minus	***	3	• 0	F	X43=	<u>~</u> .	.	-3686=		
1	FIRST PRESE	NTATION OF MUI	TIPLE DEP	ENDENT C	MIAL		\vdash	~~-	<u> </u>	OR	-3/002		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290≃		
	the "Highest Nur the "Highest Nur	thir is less than the ther Previously Paid ther Previously Paid for Previously Paid	For IN THIS For IN THIS	SPACE IS IN	ess than ess than	20, enter "20." 3. enter "3."		TOTAL DIT. FEE	·		TOTAL DOIT, FEEL		

Application or Docket Number